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Ophthalmic Literature

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Ophthalmic Literature

VOL. VI. MAY, 1916. NO. 5.

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EXAMINATIONS IN OPHTHALMOLOGY.

At a meeting held in Washington, May 8th and 9th, the American Board for Ophthalmic Examinations completed its organization and arranged to take up its work. The first examinations will be held at Memphis, Tenn., beginning December 14, 1916, the day following the meeting of the American Academy of Ophthalmology and Oto-Laryngology, and continuing as many days as the number of applicants for examination may render necessary.

All who desire to take this examination must file their formal applications three months in advance. These should be received by the Secretary of the Board, Dr. Frank Todd, Donaldson Physicians' Building, Minneapolis, Minnesota, before September 14th. It is the intention of the board to scrutinize these applications and satisfy themselves of the correctness of the facts therein stated, before admitting the applicant to examination. An important part of the examination will be by the submission of reports of five cases of different ocular conditions and diseases that have been under the personal observation and care of the applicant. These reports must be sent to the Secretary sixty days before the examination; that is, by October 14th.

In addition to the reports of cases there will be a clinical examination of patients under the supervision of the examiners, with written and oral reports of the findings; a laboratory examination, that may include besides recognition and account of specimens, and the performance of operations on animals' eyes, some of the more important demonstrations of physiologic optics. And there will be written examinations which will deal rather with the general principles of ophthalmology.

In dealing with the question of who shall be admitted to take such examinations the board has adopted as preliminary requirements; the possession of a medical degree; evidences of satisfactory ethical and medical standing in the applicant's professional community; and special requirements which take into account the applicant's experience and practice. Applicants who have been ten years engaged in the practice of ophthalmology are required to present all published medical papers. Those who have been in practice less than ten years, but more than five years must present, in addition, evidence of internship in an ophthalmic hospital, or assistantship in an eye clinic, or with an ophthalmologist in private work, with statement of the work required by the position; or, in lieu of the above, reports of interesting cases, and the number of various operations he has performed.

Applicants with less than five years' practice in ophthalmology

must present a certificate of one year's service in an ophthalmic clinic, or internship in an ophthalmic hospital, or assistantship in private practice, with statement of duties required in such positions; and also a certificate of one year of special study which should include all the important branches of ophthalmology, clinical methods, recording of cases, ophthalmic surgery, pathology and the relation of ophthalmology to other branches. After 1920 applicants will be required to have a year of clinical hospital experience, preferably in a general hospital, or of laboratory work, following four years in a medical school.

The actual conduct of the examinations will be in charge of a chief examiner and so many assistants as the number of applicants may render necessary. Some of the assistant examiners will be members of the board, but some may be appointed from outside the board. The fee for examination will be twenty-five ($25.00) dollars, which must be paid at the time of filing an application; but which will be returned if the applicant is not admitted to examination. Any accepted applicant who fails in a first examination will be admitted to a second examination within three years without the payment of any additional fee.

In deciding whether the candidate shall be admitted to examination the board has taken into account the different opportunities that have been available for the study of ophthalmology in the past, so that men of experience are accepted on the somewhat different basis from those who have recently taken up the study of ophthalmology under the improved conditions that are now opened to the student. But the examinations to be passed will be the same for all. As a whole such examinations will become more valuable as they develop from year to year with the growing experience of the examiners, and the improved facilities for study that will certainly be offered in ophthalmic schools and hospitals.

This uniformity of examination will give the certificate of the board a definite and fixed significance, which will make it of real and practical value to the profession and the public. While no formal degree is conferred, the certificate, if justly awarded, under wise regulations, will probably come to be highly regarded by those whose study and experience entitles them to the confidence of the community as physicians and surgeons devoting themselves to ophthalmic practice.

THE SUICIDE OF SCIENCE.

The medical profession takes the lead in utilizing the terrible experiences of war for the future benefit of the race, and the war injuries involving impairment of vision are likely to furnish valuable material from which important deductions may be drawn. But as war goes on it becomes ever more clear that the application of modern science to the destruction of the conditions under which science can develop is simply suicide. It may be "efficient" and "glorious," yet none the less it is self-destruction. The so-called "neutral" nations,

that only feed and clothe and supply munitions to the "belligerents"—in a word, trade with them, participate in the carnival of destruction, and suffer from it.

Ophthalmic science shows the disastrous effects, not only in the loss of such workers as MacNab, Harms, Birnbacher, Wagner and Wicherkiewicz, and in diversion of the energies of the scientific workers who survive, but equally in the crippling of agencies for intercommunication and the diffusion of thought.

OPHTHALMIC JOURNALS.

The list carried until last month on the third cover page of **Ophthalmic Literature** no longer represents the ophthalmic journals of the world. Some have consolidated, others are suspended and others still will never again be published. It is not possible at this time to determine which are only suspended until more favorable conditions arise, and which have run their course.

It will be noticed that in this month's index of ophthalmology is found no reference to any German ophthalmic journal. This may be partly due to irregularity of issue, but probably depends more on interference with the transmission of mails. A blockade to prevent supplies from going into Germany may have no logical justification when it prevented scientific publications from coming out. But in war logic soon yields to primitive instinct. For many months there has been increasing difficulty and uncertainty about getting these journals, and now the blockade has become quite effective against German science.

It becomes more and more clear that if reason and civilization are to prevail against blind passion and barbarism, their interests must be safeguarded before war begins. Science needs preparedness against war; not merely preparedness to make war efficient to the point of race disorganization, and to carry its chief centers of destruction into the enemy's country. The scientific journals of the world represent broad, permanent, vital interests of the race. The impairment of their efficiency and usefulness is a hint of those general and less obvious ills that spread abroad when European "statesmen" opened this modern Pandora's box of war.

BOOK NOTICES.

Thorington, James. Philadelphia. **Refraction of the Human Eye and Methods of Estimating the Refraction.** 8vo., 424 pages, 344 illustrations, 27 of which are colored. Philadelphia: P. Blakiston's Son and Company. Price, $2.50.

This book is an amalgamation of its author's works on "Refraction and How to Refract," "Prisms" and "Retinoscopy," rearranged and co-ordinated for beginners in ophthalmology, particularly those who have a limited knowledge of mathematics. In its present form it well represents the valuable work its author has done in this part of the literature of ophthalmology, and we do not hesitate to say that it is one of the best books of its class now available for the student.

The first chapter, devoted to optics, tells as much of this subject as can be condensed into fourteen pages. After it come three chap-

ters, thirty-nine pages, on prisms. Then comes a chapter of forty-three pages on lenses, the trial case and prescription writing. A chapter of thirty pages deals with the optical properties of the eye, vision, etc.; and one of sixteen pages, with the ophthalmoscope. Ametropia is considered in two chapters of forty-two pages, and "retinoscopy" in six chapters, fifty-six pages. One chapter of fifty-one pages is devoted to muscles and five chapters, sixty-four pages, to details of the measurement of refraction. Two chapters, thirty-six pages, are then given on presbyopia, spectacles and their fitting, etc.

The abundant illustrations add much to the clearness and value of the work. The size of the volume has been kept down by narrow page margins and the use of a thin paper; and, with its flexible cover and rounded corners, is very convenient to handle. The general character of the work conforms well to the aim stated by the author: "By being dogmatic rather than ambiguous; by occasional repetitions to avoid frequent references, and by simple explanations, and a definite statement of facts, the writer has aimed to make the text concise and comprehensive."

Transactions of the College of Physicians of Philadelphia. Third series, volume 37, 8vo, illustrated, 556 pages. Printed for the College.

This volume has especial interest for the ophthalmologist, because eighty-six pages of it are devoted to the Proceedings of the Section on Ophthalmology of the College. These proceedings are very condensed, and they are supplemented by thirteen illustrations and two colored plates. The scope of their contents may be gathered from the pages of the Index of Ophthalmology in this issue, and their high value may be inferred from the well-known attainments of the Philadelphia group of ophthalmologists, most of whom contribute to these pages.

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A man of 51 years received a blow on the left eye. There were subconjunctival hemorrhages and injection at the limbus, but the cornea was clear and uninjured, there was no injury of the iris and the pupillary reaction was normal. Transillumination disclosed a horizontal rupture of the posterior lens capsule, surrounding an almost oval central flap. The capsule showed in part a horizontal wavy plication. The fundus was normal. Fine deposits appeared later on the posterior surface of the lower half of the cornea, but these promptly disappeared. A few days later fine diffuse opacities appeared on the posterior surface of the lens, and some opacities were seen in the vitreous. A completely developed cataract was removed five months later.

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